

Report on Basic Demographic Information and Results of Twelve Month
Follow-up Procedure for Adults Completing Community-Based Treatment
Programs

Presented to: Division of Alcohol and Drug Abuse
State of South Dakota

By: Gary R. Leonardson, Ph.D.
Mountain Plains Research
55 Rodeo Trail
Dillon, MT 59725
406-683-6424
mpr@zipmt.com

December 23, 2008

EXECUTIVE SUMMARY FROM FORMS COMPLETED

A summary of the basic findings for community-based programs for adults is presented in this section.

- ◆ The abstinence rate for those (n = 2752) in the 12-month follow-up survey was 48.5 percent. Considering the fact that many people were forced into treatment by court mandates, the abstinent rate was very good.
- ◆ Clients completing treatment (and were abstinent during follow-up) were hospitalized **3.0 times less** after treatment than they were before, and the number of days hospitalized was **1.9 times less** during the post-treatment time.
- ◆ Overall, there were **three times** as many ER visits before treatment as there were after treatment.
- ◆ Before treatment about one-third of the clients were unemployed, but one year post-treatment only 9.0 percent of all persons completing treatment were unemployed. For those who were abstinent during the follow-up period, the unemployment rate was only 7.7 percent. The benefit of the improved employment opportunities to the individuals and society was substantial.
- ◆ Before treatment those working were absent 3.5 days 'in the past 30 days.' After treatment the number of days absent 'in the past 30 days' was only 1.0 day for all clients (0.8 days for those abstinent), resulting in a 71.4 percent improvement for all completing treatment and a 77.1 percent improvement for those abstinent.
- ◆ There was a substantial reduction (70.8%) for all clients, (79.2% for those abstinent) in the number of vehicle accidents between pre- and post-treatment time periods.
- ◆ In the year prior to treatment more than three-fourths (75.9%) of the clients had been arrested, but this was reduced to only 17.4 percent in the year following treatment for a 77.1 percent improvement.
- ◆ There was a considerable reduction (85.3% for all

clients) in those jailed overnight between pre- and post-treatment assessments.

- ◆ Overall, there were **4.4 times** more people arrested before treatment than there were after treatment.
- ◆ Before treatment 2.9 percent of the clients indicated that they were homeless, but after treatment only 1.1 percent mentioned that they had no home, resulting in a 62.1 percent improvement.

Factors Related to Success

- ◆ Persons working full-time were more likely to remain substance free than were those not working full-time. Also, clients who were substance free during follow-up had fewer days absent from work.
- ◆ Clients who were substance free had fewer problems with: boss or supervisor, getting the job done, making mistakes at work, missing work, and being late for work.
- ◆ Based on marital status at follow-up, persons never married were more likely to have used substances than were married persons.
- ◆ Clients who attended AA or NA and/or other support groups were much more likely to remain substance free than were those who stopped attending.
- ◆ Persons who attended aftercare were much more likely to remain substance free than were those who stopped attending.
- ◆ Clients who were substance free had fewer problems during the follow-up period with boredom, stress, and loneliness.
- ◆ Since completing treatment, person using substances were more likely to have had periods of 2 weeks or more, in which they felt depressed.
- ◆ Clients using substances were more likely to be around

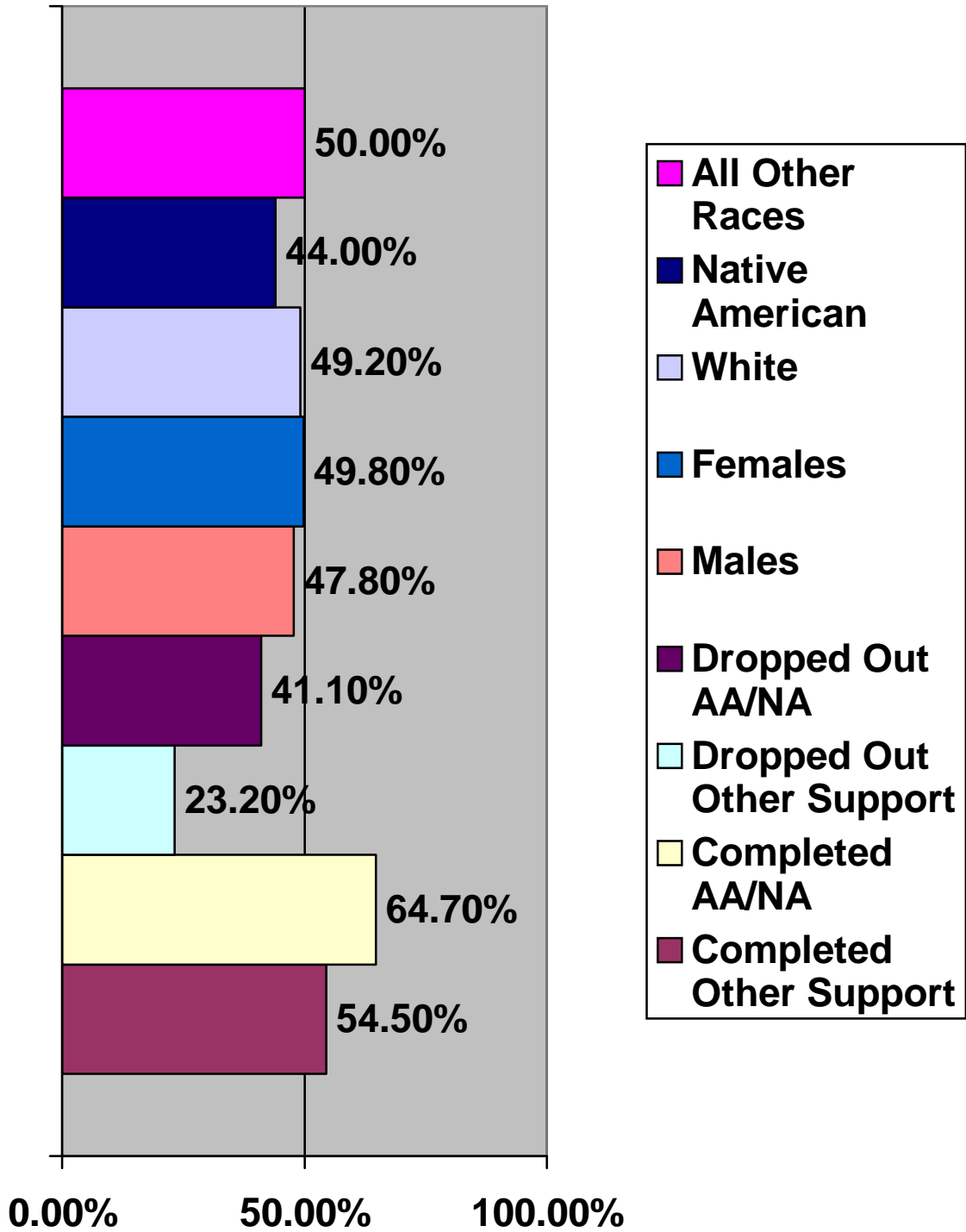
others using alcohol or drugs, have cravings for alcohol and/or drugs, and use tobacco products.

- ◆ Clients who were substance free were much less likely to be arrested or incarcerated.
- ◆ Clients who were substance free were less likely to be hospitalized.
- ◆ Clients who rated the treatment programs highly were much more likely to be substance free.
- ◆ Clients who were substance free had fewer problems with marital or 'significant other' relationships, family problems, and financial problems during the follow-up period.
- ◆ Clients who lived with parents, spouses, and children were more likely to be substance free during the follow-up period than were those living alone, with roommates, or homeless.
- ◆ Clients who had frequent visits to hospitals and ER's the year preceding treatment were more likely to use substances than were those with fewer visits.
- ◆ Clients who were unemployed at time of entry into treatment were less likely to be substance free during the follow-up period.
- ◆ Those working full-time before entering treatment were less likely to be using substances during the follow-up period.
- ◆ Those who had experienced trouble thinking or concentrating before treatment were more likely to use substances during follow-up.
- ◆ Those who had experienced thoughts of suicide before treatment were more likely to use substances during follow-up.
- ◆ Clients who reported suicide attempts on the History Form were more likely to use substances during follow-up.
- ◆ Persons having shakes after cutting down were more

likely to use substances during follow-up.

- ◆ Clients who reported that they had used so much that the next day they could not remember what they had said or done because of alcohol or drug use were more likely to use substances during follow-up.
- ◆ Clients using drugs or alcohol to relieve a hangover were more likely to use substances during follow-up.
- ◆ Persons who had missed work in the year previous to treatment because of substance use were more likely to use alcohol or drugs during follow-up than were those not missing work.
- ◆ Clients who had reported doing anything unusual, totally out of character, while drinking or using drugs, were more likely to use substances.
- ◆ Persons who vandalized property before age 15 were more likely to use substances than were those who didn't report vandalizing property.
- ◆ Those who frequently meditate or pray were less likely to use substances.
- ◆ Clients with high accident rates were more likely to use substances.
- ◆ Clients who had ever been treated by a psychologist or psychiatrist for depression were more likely to use substances during follow-up.
- ◆ Person who reported being late for work on the History Form were more likely to use substances during follow-up.
- ◆ Those reporting smoking in the year before entering treatment were more likely to use substances during follow-up.
- ◆ Clients who had ever drank heavily (i.e., 5th of liquor, 20 drinks, 3 six-packs of beer, or 3 bottles of wine) in one day were more likely to use substances during follow-up.

Abstinence Rates: Various Groups



Demographic Information (From Intake Form)

Ethnic Origin

Information for this section of the report was obtained from the MPR Adult Intake forms that were adapted and used by permission of New Standards, Inc. The information used in this section of the report was obtained for persons completing treatment programs between April 1998 and November 2008. Information from the Intake, History, and Discharge forms were available for about 11,228 persons. The only two ethnic groups with notable numbers were White (65.9%) and Native American (26.0%), representing 91.9 percent of the total.

Ethnicity	Number of Cases	Percent
Asian	45	0.4%
Black	200	1.8%
Hispanic	196	1.7%
Native American	2915	26.0%
White	7394	65.9%
Biracial	420	3.7%
Other	58	0.5%
Total	11228	

Marital Status

Never Married (54.6%) and Divorced (23.2%) were the most frequently mentioned categories of marital status.

Marital Status	Number of Cases	Percent
Never Married	6066	54.6%
Divorced	2576	23.2%
Separated	720	6.5%
Widowed	172	1.5%
Married	1582	14.2%
Total	11116	

Education Attainment

High school diploma/GED was the most frequently mentioned category (64.8%) for educational attainment, followed by no diploma earned (17.1%), vocational/technical school (10.4%), and Associate's degree (3.9%).

Highest Degree Earned	Number of Cases	Percent
No Degree or Diploma Earned	1812	17.1%
High school diploma/GED	6886	64.8%
Vocational/technical school	1104	10.4%
Associate's Degree	416	3.9%
Bachelor's Degree	348	3.3%
Master's Degree	40	0.4%
M.D./J.D./Doctorate	17	0.2%
Total	10623	

Current Employment Status

At entry into the treatment programs, about one-half were employed either part- or full-time. The most common employment status was full-time employment (39.9%).

Employment Status	Number of Cases	Percent
Full-time employment	4445	39.9%
Part-time employment	1320	11.8%
Unemployed	4307	38.6%
Retired	86	0.8%
Disabled	493	4.4%
Homemaker	245	2.2%
Student	255	2.3%
Total	11151	

Financial Assistance

Some of the clients were receiving Disability Compensation (6.2%) or Welfare (4.3%), and a few (0.9%) were receiving both at intake into the treatment programs.

Financial Assistance	Number of Cases	Percent Yes
Receiving Disability Compensation	11112	6.2%
Receiving Welfare	11046	4.3%

Treatment Payment

Most (61.6%) of the clients were financed exclusively by the Division of Alcohol and Drug Abuse as indicated in the 'Other' category. Self-pay (28.4%) and Medicaid (8.6%) were the other most frequent types of payment. The percents do not equal 100 percent, because there were multiple payment sources for some people.

Payment Type	Number of Cases	Percent
Medicare	239	2.3%
Medicaid	877	8.6%
Blue Cross/Blue Shield	248	2.4%
Private/group insurance	347	3.4%
HMO	38	0.4%
Self-pay	2897	28.4%
Other	6296	61.6%
Total	10942	

Referral Source

The Court (57.0%) was the most frequent referral source. Other referral sources were: Self (25.5%), Other (15.0%), and Family (10.9%). Since there were multiple referral sources, the sum of the percents was more than 100.

Referral Source	Number of Cases	Percent Checking Category
Court	6302	57.0%
Detox Center	940	8.5%
Employer/EAP	109	1.0%
Family	1205	10.9%
Friends	623	5.6%
Mental Health Worker	470	4.2%
Physician	243	2.2%
School	47	0.4%
Self	2825	25.5%
Social Worker	751	6.8%
Other	1664	15.0%

Reasons for Entering Treatment

It is obvious that these particular clients entered treatment for reasons external to themselves, based on responses to referral sources and reasons for program entry. DWI or DUI (43.0%) arrests were the most frequent reasons for entering treatment, followed by Other Court Action (35.0%) and In Lieu of Incarceration (10.4%). Since persons could make multiple responses and not everyone responded to the questions, the sum of the percents does not equal 100.

Reasons	Number of Cases	Percent Yes
DWI or DUI arrest	4651	43.0%
Other Court Action	3767	35.0%
In Lieu of Incarceration	1113	10.4%
Ultimatum from Employer	151	1.4%

Ultimatum from Spouse/Mate	380	3.5%
----------------------------	-----	------

Most Recent Chemicals Used (From Intake Form)

Upon admission to the treatment programs, it was found that the most common drugs used were alcohol, marijuana, and cocaine. Nearly all (97.8%) had used alcohol and 68.0 percent had used marijuana at some time.

Substance	Within 24 Hours	Within 2-7 Days	Within 8-30 Days	Over a Month Ago	Never Used
Alcohol	3.2%	15.9%	25.9%	53.0%	2.1%
Marijuana	1.9%	6.3%	11.6%	48.2%	32.0%
Cocaine	0.1%	0.5%	2.2%	31.4%	65.8%
Stimulants	0.7%	1.0%	2.8%	24.4%	71.0%
Sedatives	0.6%	0.5%	1.0%	11.7%	86.2%
Opiates	0.3%	0.4%	0.9%	11.8%	86.6%
Tranquilizers	0.4%	0.3%	0.6%	9.4%	89.4%
Hallucinogens	0.0%	0.1%	0.5%	21.3%	78.0%
Painkillers	1.2%	1.2%	2.3%	17.4%	77.9%
Other	1.2%	0.3%	0.9%	7.9%	89.7%

Demographic Information from Adult History Form

Work Outside Home

More than half (56.2%) of the clients were working either part- or full-time, but a large minority was unemployed at the time of entry into the treatment programs.

Work Outside Home	Number of Cases	Percent
Yes, Full-time	4751	42.5%
Yes, Part-time	1535	13.7%
No, By Choice	523	4.7%
No, Unemployed	4375	39.1%
Total	11184	

Personal Income Last Year

Considering the relatively high number of unemployed persons, it was not surprising that most (54.3%) of those in the treatment programs had personal incomes of less than \$10,000 per year. Very few reported making more than \$30,000 per year.

Personal Income Categories	Number of Cases	Percent
Less than \$10,000	5931	54.3%
\$10,001 to \$20,000	2820	25.8%
\$20,001 to \$30,000	912	8.4%
\$30,001 to \$50,000	320	2.9%
Over \$50,000	76	0.7%
Don't want to say	855	7.8%
Total	10914	

Family Income Last Year

As would be expected, family income levels were higher than personal income levels, but these income amounts were quite modest with only 8.9 percent reporting family incomes over \$30,000.

Family Income Categories	Number of Cases	Percent
Less than \$10,000	3972	38.0
\$10,001 to \$20,000	2589	24.7
\$20,001 to \$30,000	1159	11.1
\$30,001 to \$50,000	602	5.8
Over \$50,000	329	3.1
Don't want to say	1812	17.3
Total	10463	

Where Do You Live?

Most (85.4%) people reported that they were currently living in a 'City' or a 'Town' with 14.6% indicating that they currently lived in a 'Rural Area.'

Place of Residents	City	Town	Rural Area
Where do you live now?	51.4%	34.0%	14.6%
Where have you lived most your life?	48.5%	33.0%	18.5%

Problem Areas

The clients were asked a series of questions about personal or family problems or situations. Most (59.5%) clients had been in treatment programs before, and nearly half (44.0%) had encountered problems with family members drinking. Other prominent problem areas were: treated for depression (29.4%), problems with family members using drugs (22.8%) physically abused or beat up after age 18 (22.6%), and hit hard before age 18 (22.4%).

Problem Areas	Number of Cases	Percent Yes
Have you been in treatment before?	11121	59.5%
Did drinking by any family member cause problems?	11140	44.0%
Did drug use by any family member cause problems?	11101	22.8%
Before 18, were you hit so hard that you had marks?	11169	22.4%
Since 18, were you hit so hard that you had marks?	11148	22.6%
Before 18, were you forced to have sex?	11159	19.0%
Since 18, were you forced to have sex?	11149	11.4%
Have you ever been treated for depression?	11148	29.4%
Have you ever been treated for any other emotional disorders?	11060	16.8%
Have you ever tried to commit suicide?	10959	20.3%
Have you ever starved yourself for more than 3 months?	11133	4.7%
Have you ever binged and vomited for over 3 months?	11038	3.6%
Did you have a hard time learning when growing up?	10890	16.2%

Additional Problem Areas Before You Were 15 Years Old

Two major problem areas encountered by the clients before age 15 were stealing (35.8%) and starting fights (30.2%).

Problem Area	Number Cases	Percent Yes
Skip school more than 10 times?	10204	27.0%
Get suspended or expelled from school?	10179	29.1%
Get arrested?	10154	23.3%
Run away from home overnight more than once?	10164	23.0%
Vandalize or destroy property?	10145	21.4%
Steal?	10139	35.8%
Have sex with more than one person?	10152	23.4%
Start physical fights?	10158	30.2%

Questions on Spirituality

Many (62.8%) of the clients participated in prayer or meditation at least monthly, and about half (48.5%) of the clients prayed or meditated at least weekly.

How often do you meditate or pray?

Pray or Meditate	Number of Cases	Percent
Never	2555	23.0%
Less than once a month	1572	14.2%
Several times a month	1583	14.3%
Every week	1517	13.7%
Every day	3861	34.8%
Total	11088	

This group of clients was not highly involved in organized religious services, since 42.0% never attended religious services, and many attended services less than once a month.

How often do you attend religious services of any kind?

Religious Services Attendance	Number of cases	Percent
Never	4627	42.0%
Less than once a month	3619	32.8%
Several times a month	1241	11.3%
Every week	1427	12.9%
Every day	109	1.0%
Total	11023	

Outcome Factors Assessed

The basic outcome factors are assessed and reported for persons who completed one-year follow-up forms. One year follow-up information was available on 2752 persons. Persons are contacted by phone (or mail in a few cases in which phone numbers were not available) at 12 months post-treatment. The one-year period following treatment was the focal point because much of the comparative data between the History Form and Follow-up Form were based on information or performances in the past year.

The key outcome factors assessed in this report are: aftercare, working/not working, months employed in past year, work problems, days absent from work, working under the influence of alcohol or drugs, substance use in the past 12 months, times hospitalized, days hospitalized, emergency room visits, doctor office visits, accidents, homelessness, arrests in past year, offenses committed, and time in jail.

Aftercare During Follow-up

Of those surveyed with the follow-up instrument, most (58.8%) received some aftercare, about two-thirds (64.6%) attended AA/NA, and a few (11.1%) attended other support groups. Those abstinent attended aftercare and AA/NA at a higher rate than did those who used substances, indicating the importance of aftercare services for those who are successful.

Program	Percent Attending- All Clients	Percent Attending- Abstinent Clients	Percent Attending- Substance Users
Aftercare	58.8%	68.2%	50.1%
AA/NA	64.6%	72.8%	57.0%
Other Support	11.1%	10.3%	10.2%

Working/Not Working: Comparison between Before and After Treatment

Before treatment started, 32.7 percent of the clients in the follow-up study were unemployed. Following treatment, 9.0 percent of all persons in the follow-up study were unemployed and only 7.7 percent of those who were abstinent were unemployed. Following treatment about two-thirds (67.2%) were working full-time, compared to 47.8 percent before treatment. The positive economic impact for the clients and society is very significant.

Working	History Form Percent Yes	Follow-up Form Percent Yes
Yes, Full-Time	47.8%	67.2% (71.0%)
Yes, Part-Time	14.3%	14.7% (13.0%)
No, By Choice	5.3%	9.1% (8.3%)
No, Unemployed	32.7%	9.0% (7.7%)

The number in parentheses () refers to persons who were abstinent during the follow-up period.

Months Employed: Pre- and Post-Treatment Results

There was a significant improvement in the number of months worked full-time between the pre- and post-treatment measures. In the 12 months before treatment, those working averaged 6.6 months full-time employment. One year after treatment the same clients averaged 7.4 months for all persons and 8.1 months for those abstinent.

Months Employed	History Form Pre-Test	Follow-up Form Post-Test
Months, Full-Time	6.6	7.4 (8.1)
Months, Part-Time	1.9	1.5 (1.4)
Months, Not Worked	3.8	3.1 (2.6)

The number in parentheses () refers to persons who were abstinent during the follow-up period.

Problems at Work: Pre- and Post-test Results

Clients were asked identical questions before treatment started and 12 months following treatment with respect to problems at work, during the past 12 months. In every situation but injuries, there were fewer work problems after treatment than before. After treatment, the clients had fewer problems with missing work, getting work done, making mistakes, being late for work, and problems with supervisors. The improvements between the 'before' and 'after' treatment measures were outstanding. The results below were based on the pre- and post-test treatment results for persons who had both history and 12-month follow-up information.

Those who were abstinent had superior results in each 'work problems' area listed in the table below. The percents listed in the parentheses () in the last columns refer to the rates of those who were abstinent during the follow-up period.

Work Problems	History Form Percent Yes	Follow-up Form Percent Yes	Percent Improvement
With supervisor or boss?	15.9%	9.1% (5.8%)	42.8% (63.5%)
Getting your job done?	6.6%	3.7% (1.9%)	43.9% (68.7%)
Missing work?	25.4%	4.9% (2.8%)	80.7% (89.0%)
Being late?	23.3%	8.1% (3.4%)	65.2% (85.4%)
Getting injured?	6.4%	8.4% (4.5%)	-31.3% (29.7%)
Making mistakes?	13.6%	7.6% (6.1%)	44.1% (55.1%)

The number in parentheses () refers to persons who were

abstinent during the follow-up period.

Days Absent From Work in Past Months: Pre- and Post-Treatment Results

There was a significant reduction in the number of days absent from work between 'before' treatment and 'after' treatment. Before treatment, there was an average of 3.5 days of missed work 'in the past month.' After treatment, the average was reduced to 1.0 day for all completing treatment and 0.7 days for those who were abstinent. The rate of improvement between pre- and post-treatment measures was very high, indicating the ability of the treatment programs to make positive changes in the lives of individuals.

Days Absent From Work Past Month	History Form Pre-Test	Follow-up Form Post-Test	Percent Improvement
Days Absent	3.5	1.0 (0.8)	71.4% (77.1%)

The number in parentheses () refers to persons who were abstinent during the follow-up period.

Drug and Alcohol Influence at Work: Pre- and Post-test Results

After leaving treatment, clients were not likely to use alcohol or drugs while working. There was a dramatic reduction between pre- and post-treatment measures of substance use at work. Before entering treatment, over one-half (52%) of the clients were under the influence of alcohol/drugs daily while working, but after treatment only 1.0 percent reported daily influences of substances while working.

Under the Influence of Alcohol or Drugs while Working?	History Form Pre-Test	Follow-up Form Post-Test
Never	9.8%	95.3%
Less than once per month	13.8%	2.2%
1 to 3 times per month	10.9%	0.9%
1 to 3 times per week	13.5%	0.5%
Almost every day	52.0%	1.0%

Substance Use 12 Months after Completing Treatment

The overall abstinence rate for 'any' substance use for this group of persons in the outcome study was a very respectable 48.5 percent after 12-months post-treatment. Alcohol and marijuana were the most popular substances used. An increase in the use of stimulants was noted.

Substance Use	Number of Cases	Percent Using
Alcohol	2684	50.2%
Marijuana	2660	10.0%
Cocaine	2660	1.7%
Stimulants-Meth	2665	3.0%
Sedatives	2661	1.8%
Opiates/Heroin	2661	0.7%
Tranquilizers	2663	1.4%
Hallucinogens	2661	0.5%
Painkillers	2664	3.7%
Other	2660	0.6%

Hospitalization: Pre- and Post-Treatment Comparisons

In nearly every category the clients had more times and days in the hospital the year before treatment than they did in the 12 months following treatment. Those completing treatment were hospitalized 3.0 times less (4.6 for those who were abstinent) after treatment than they were before, and the number of days hospitalized was 1.9 times (2.2 for those who were abstinent) less during the post-treatment time. The mean average for those who were abstinent can be identified in the parentheses (). Although all who completed treatment had improvements in outcomes between pre- and post-treatment measures, the abstinent groups had superior results.

Reason for Hospitalization	Before Times* Hospitalized	After Times# Hospitalized	Before Days* Hospitalized	After Days# Hospitalized
Illness, Injury or Surgery	.37	.15 (.13)	.97	.63 (.78)
Detoxification	.19	.04 (.00)	.57	.19 (.03)
Psychiatric Care	.11	.03 (.01)	.65	.33 (.17)
Pregnancy or Childbirth	.08	.04 (.04)	.10	.10 (.14)
Any Other Reason	.08	.02 (.00)	.21	.05 (.01)
Total	.83	.28 (.18)	2.50	1.30 (1.13)

*Before refers to 12 months preceding treatment.

#After means the 12-month period following treatment.

The number in parentheses () refers to persons who were abstinent during the follow-up period.

Emergency Room and Office Visits: Pre- and Post-Treatment Comparisons

In all categories, except Pregnancy or Childbirth, the clients had more office visits the year before treatment than they did the 12 months following treatment. Overall, there were 3.0 (also, 3.0 for those who were abstinent) times as many ER visits before treatment than there were after treatment. There were less overall differences in office visits between 'before' and 'after' treatment visits. This is not surprising since office visits may represent preventive medicine as much as medical difficulties. There were significantly fewer office visits for Psychiatric Care 12 months after treatment than there was 12 months prior to treatment.

Emergency Room or Office Visits	Before ER Visits*	After ER Visits#	Before Office Visits*	After Office Visits#
Illness, Injury or Surgery	.48	.23 (.17)	1.10	.96 (.82)
Psychiatric Care	.08	.02 (.01)	.45	.24 (.19)
Pregnancy or Childbirth	.05	.01 (.02)	.22	.27 (.35)
Routine Examination	NA	NA	.81	.54 (.58)
Any Other Reason	.14	.04 (.03)	.38	.17 (.11)
Total	.68	.23 (.23)	2.96	2.18 (2.05)

*Before refers to 12 months preceding treatment.

#After means the 12-month period following treatment.

The number in parentheses () refers to persons who were abstinent during the follow-up period.

Homeless

Before treatment 2.9 percent of the clients indicated that they were homeless, but after treatment only 1.1 percent of the survey respondents mentioned that they had no home. This results in a 62.1 percent improvement or 2.6 times fewer homeless clients after treatment.

Accidents Past 12 Months: Pre- and Post-Treatment Results

There was a significant reduction (70.8% improvement overall) in the number of reported accidents as drivers between the pre- and post-treatment measures.

Accidents in the Past Year	History Form Pre-Test	Follow-up Form Post-Test	Percent Improvement
Number of Accidents	.24	.07 (.05)	70.8% (79.2%)

The number in parentheses () refers to persons who were abstinent during the follow-up period.

Arrested in the Past Year: Pre- and Post-test Results

There was a substantial reduction (4.4 times fewer) between pre- and post-treatment measures of those arrested 'in past year.' Before entering treatment, more than three-fourths had been arrested in the past year, but the arrest rates declined to only 17.4 percent for all completing treatment.

Arrested in Past Year	History Form Percent Yes	Follow-up Form Percent Yes	Percent Improvement
Arrested	75.9%	17.4%	77.1%

Times Arrested in the Past Year: Pre- and Post-test Results

In every offense category the clients had more (or the same) arrests 12 months before treatment than they did in the 12 months following treatment. There were 1.4 times fewer arrests during the follow-up period compared to 12 months prior to treatment.

Offense	History Form Pre-Test	Follow-up Form Post-Test
DWI	.79	.56
Speeding or Other Moving Traffic Violation	.28	.11
Disorderly Conduct	.12	.09
Assault or Battery	.11	.06
Theft	.06	.05
Vandalism	.19	.02
Possession of Drug or Drug Paraphernalia	.28	.13
Sale of Drugs	.03	.03
Other	.19	.45
Total	2.05	1.50

Jailed Overnight in Past 12 Months: Pre- and Post-test Results

There was a significant reduction in the percent of clients incarcerated overnight between the pre- and post-treatment measures. Before entering treatment, about two-thirds had been jailed overnight 'in the past year,' but the incarceration rates declined to 9.9 percent for those completing treatment.

Jailed Overnight	History Form Percent Yes	Follow-up Form Percent Yes	Percent Improvement
Percent Jailed	67.3%	9.9%	85.3%

From Adult Discharge Form

Program Type

Data analysis in this section was done on all persons (n = 11,308) who had been discharged. A vast majority (69.0%) were involved in day or evening outpatient programs.

Type of Program	Number of Cases	Percent
Residential inpatient only	1687	14.9%
Evening outpatient only	5376	47.5%
Day outpatient only	2429	21.5%
Day hospital	740	6.5%
Combination: inpatient evening outpatient	161	1.4%
Combination: inpatient day outpatient	93	0.8%
Combination: inpatient day hospital	17	0.2%
Other	805	7.1%
Total	11308	

Discharge Status for All Referrals to Programs

Based on information on all clients who received services in treatment programs, most (81.5%) were in the 'Completed program' category. A few (7.9%) 'Left against staff advice' or were 'Discharged for noncompliance' (6.3%). The 'Completed program' category (n=10134) is different from the 11308 reported on the previous page, because only those with completed information on all forms (Intake, History, and Discharge) and signed consent forms were used as part of the outcome (follow-up) study.

Discharge Status	Number of Cases	Percent
Evaluation only	64	0.5%
Completed program	10134	81.5%
Transferred to other program	463	3.7%
Left against staff advice	978	7.9%
Discharged for noncompliance	790	6.3%
Insufficient funding	5	0.0%
Other	7	0.1%

Chemical Use During Treatment

As would be expected, very few (8.3%) clients were known to be using chemicals during treatment.

Chemical Use	Number of Cases	Percent
No	9145	81.8%
Not sure	1115	10.0%
Yes, as Inpatient	89	0.8%
Yes, as Outpatient	835	7.5%

Total	11184	
-------	-------	--

Family Program Participation

Few (28.4%) of the families of the clients were involved in the family programs.

Participation in Family Program	Number of Cases	Percent
No family or significant other	6017	54.5%
Patient refused	1214	11.0%
Family/significant others refused	671	6.1%
Some involvement	3138	28.4%
Total	11040	

Who Participated in Family Program?

Of family members who did take part in the family programs, spouse/mate and parents were the most prevalent participants.

Attendance	Percent None	Percent Partial	Percent Full
Spouse/mate	57.2%	24.1%	18.7%
Parents	55.6%	24.9%	19.5%
Siblings	82.1%	10.7%	7.2%
Children	81.5%	10.5%	8.0%
Friends	89.6%	6.7%	3.7%

Post-Discharge Referrals

Alcoholics Anonymous, Program Aftercare, and Narcotics Anonymous were the most frequent referral sources. Since there were multiple referrals per client, the total percent equals more than 100 percent.

Referral Source	Number of Cases	Percent
Alcoholics Anonymous	9742	87.8%
Emotions Anonymous	29	0.3%
Cocaine Anonymous	43	0.4%
Narcotics Anonymous	3704	33.4%
Women for Sobriety	48	0.4%
AL-ANON	231	2.4%
Other Support Group	701	7.4%
Program Aftercare	8394	75.6%
Individual Therapy/Counseling	1252	11.3%
Family Therapy/Counseling	380	3.4%
Halfway House	668	6.0%
Other CD Program	867	7.8%
Other	990	8.9%

Predictors of Success

Based on the statistical analysis of information on the 2348 clients who were surveyed with a follow-up instrument, the following factors were found to be predictive of success (i.e., did not use substances during follow-up period).

Follow-up Form

- ◆ Persons working full-time were more likely to remain substance free than were those not working full-time. Also, clients who were substance free during follow-up had fewer days absent from work.
- ◆ Clients who were substance free had fewer problems with: boss or supervisor, getting the job done, making mistakes at work, missing work, and being late for work.
- ◆ Based on marital status at follow-up, persons never married were more likely to have used substances than were married persons.
- ◆ Clients who attended AA or NA and/or other support groups were much more likely to remain substance free than were those who stopped attending.
- ◆ Persons who attended aftercare were much more likely to remain substance free than were those who stopped attending.
- ◆ Clients who were substance free had fewer problems during the follow-up period with boredom, stress, and loneliness.
- ◆ Person using substances were more likely to have had periods of 2 weeks or more, since completing treatment, in which they felt depressed.
- ◆ Clients using substances were more likely to be around others using alcohol or drugs, have cravings for alcohol and/or drugs, and use tobacco products.

- ◆ Clients who were substance free were much less likely to be arrested or incarcerated.
- ◆ Clients who were substance free were less likely to be hospitalized.
- ◆ Clients who rated the treatment programs highly were much more likely to be substance free.
- ◆ Clients who were substance free had fewer problems with marital or 'significant other' relationships, family problems, and financial problems during the follow-up period.
- ◆ Clients who lived with parents, spouses, and children were more likely to be substance free during the follow-up period than were those living alone, with roommates, or homeless.

History Form

- ◆ Clients who had frequent visits to hospitals and ER's the year preceding treatment were more likely to use substances than were those with fewer visits.
- ◆ Clients who were unemployed at time of entry into treatment were less likely to be substance free during the follow-up period.
- ◆ Those who worked full-time before entering treatment were less likely to be using substances during the follow-up period.
- ◆ Those who had experienced trouble thinking or concentrating before treatment were more likely to use substances during follow-up.
- ◆ Those who had experienced thoughts of suicide before treatment were more likely to use substances during follow-up.
- ◆ Clients who reported suicide attempts on the History Form were more likely to use substances during follow-up.

- ◆ Persons who had shakes after cutting down were more likely to use substances during follow-up.
- ◆ Clients who reported that they had used so much that the next day they could not remember what they had said or done because of alcohol or drug use were more likely to use substances during follow-up.
- ◆ Clients who had drugs or alcohol to relieve a hangover were more likely to use substances during follow-up.
- ◆ Persons who had missed work in the year previous to treatment because of substance use were more likely to use alcohol or drugs during follow-up.
- ◆ Clients who had reported doing anything unusual, totally out of character, while drinking or using drugs, were more likely to use substances.
- ◆ Persons who vandalized property before age 15 were more likely to use substances than were those who didn't report vandalizing property.
- ◆ Those who frequently meditated or prayed were less likely to use substances.
- ◆ Clients with high accident rates were more likely to use substances.
- ◆ Clients who had ever been treated by a psychologist or psychiatrist for depression were more likely to use substances during follow-up.
- ◆ Person who reported being late for work on the History Form were more likely to use substances during follow-up.
- ◆ Those who reported smoking in the year before entering treatment were more likely to use substances during follow-up.
- ◆ Clients who had ever drank heavily (i.e., 5th of liquor, 20 drinks, 3 six-packs or beer, or 3 bottles of wine) in one day were more likely to use substances during follow-up.

Ratings of Program by Participants

The clients were asked a series of four agree/disagree questions concerning the treatment program that they completed. In general the clients had very high ratings of the treatment programs.

A strong (85.8%) majority of the all clients completing the follow-up interview agreed that it was a good program. As would be expected, those who were substance free rated the program higher (89.7% agreed the program was good).

It was a good program.	Number of Responses	Percent
Strongly Agree	1651 (894)	63.5% (70.6%)
Agree	580 (242)	22.3% (19.1%)
Not Sure	269 (99)	10.3% (7.8%)
Disagree	49 (17)	1.9% (1.3%)
Strongly Disagree	51 (15)	2.0% (1.2%)

The number in parentheses () refers to persons who were abstinent during the follow-up period.

Most (88.4%) clients completing the follow-up form agreed that the counselors were helpful. Survey participants who were substance free rated the program higher (91.2% felt that the counselors were helpful).

The Counselors were helpful.	Number of Responses	Percent
Strongly Agree	1829 (968)	70.5% (76.3%)
Agree	464 (189)	17.9% (14.9%)
Not Sure	201 (73)	7.7% (5.8%)
Disagree	42 (20)	1.6% (1.6%)
Strongly Disagree	59 (18)	2.3% (1.4%)

The number in parentheses () refers to persons who were abstinent during the follow-up period.

A majority (83.4%) of those completing the follow-up survey felt they 'learned much' in the treatment program. The substance free clients rated this question higher with 88.8 percent agreeing with the statement.

I learned much.	Number of Responses	Percent
Strongly Agree	1649 (905)	63.5% (71.4%)
Agree	517 (221)	19.9% (17.4%)
Not Sure	276 (87)	10.6% (6.9%)
Disagree	76 (32)	2.9% (2.5%)
Strongly Disagree	78 (22)	3.0% (1.7%)

The number in parentheses () refers to persons who were abstinent during the follow-up period.

Most (85.5%) of the clients indicated that they would recommend the program to other people. The substance free clients rated the program higher with 90.4% indicating that they would recommend the program to other people.

I would recommend the program to other people.	Number of Responses	Percent
Strongly Agree	1808 (981)	69.8% (77.4%)
Agree	408 (165)	15.7% (13.0%)
Not Sure	204 (66)	7.9% (5.2%)
Disagree	69 (25)	2.7% (2.0%)
Strongly Disagree	102 (30)	3.9% (2.4%)

The number in parentheses () refers to persons who were abstinent during the follow-up period.

OPEN-ENDED QUESTIONS

These comments were taken from those completing the follow-up form that was administered 12 month post-treatment. To date, 2752 persons have completed the follow-up survey, but the responses listed below are for about 1000 persons who were surveyed in the past three years.

What did you like best about the Alcohol and Drug Treatment Program?

Liked best for those surveyed in the past three years

- Counselors (240 responses)
- Nothing (95 responses)
- Group discussions/group support (84 responses)
- Information (52 responses)
- Talking (38 responses)
- Environment/atmosphere (26 responses)
- One-on-one sessions (25 responses)
- People in the program (22 responses)
- Learned a lot (21 responses)
- Openness (20 responses)
- Being with people with similar problems (19 responses)
- People really cared (18 responses)
- Everything (17 responses)
- Small groups (16 responses)
- Staff (16 responses)
- It helped me/was helpful (14 responses)
- It was a good program (14 responses)
- All of it/everything (12 responses)
- Tools (12 responses)
- Knowledge (11 responses)
- Meeting others/new people (11 responses)
- Looked at/Learn about self (10 responses)
- Presentation (10 responses)
- When it was over/being done (9 responses)
- Structure (7 responses)
- Freedom/Break (6 responses)
- Spirituality (6 responses)
- Camaraderie (6 responses)
- Non-judgmental (5 responses)

- Hearing other peoples' stories (4 responses)
- Aftercare (3 responses)
- Speakers/Outside speakers (3 responses)

OPEN-ENDED QUESTIONS

What, if anything, about the program do you think needs to be changed?

Changes for those surveyed in the past three years

- Nothing (664 responses)
- Counselors (better, more compassionate, ex-addicts) (23 responses)
- More one on ones (20 responses)
- Presentation (don't force, mundane) (17 responses)
- Better food/drinks (12 responses)
- Longer (12 responses)
- Don't know (10 responses)
- More structured setting (9 responses)
- Easier to get in/cheaper (7 responses)
- Better facilities (6 responses)
- Separate those who don't want to be there (6 responses)
- Smaller groups (6 responses)
- Update info (6 responses)
- Update videos (6 responses)
- Group discussions (5 responses)
- Separate programs for men and women (5 responses)
- More freedom (4 responses)
- Separate groups into different ages (4 responses)
- Change location (3 responses)
- Have groups more often (3 responses)
- Hours (time) (3 responses)
- Less work/bookwork (3 responses)
- Separate alcohol from drugs (3 responses)
- Shorter (3 responses)
- Healthier food (2 responses)
- Keep same counselors throughout program (2 responses)